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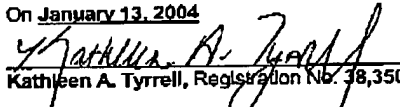
## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: DEX-0142  
Inventors: Macina et al.  
Serial No.: 09/802,674  
Filing Date: March 9, 2001  
Examiner: Harris, Alana M.  
Group Art Unit: 1642  
Title: Method of Diagnosing, Monitoring,  
Staging, Imaging and Treating  
Gastrointestinal Cancer

## Certificate of Facsimile Transmission

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On January 13, 2004

  
Kathleen A. Tyrrell, Registration No. 38,350

Assistant Commissioner for Patents  
Washington, D.C. 20231

Reply under 37 C.F.R. 1.111

This is a reply to the Office Action mailed October 14, 2003  
setting a three (3) month statutory period for response. Please  
enter the following remarks and amendments into the record.

Amendments to the claims are reflected in the listing of  
claims which begins on page 2 of this paper.

Remarks begin on page 3 of this paper.

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**Licata & Tyrrell P.C.**

66 E. Main Street  
Marlton, New Jersey

Tel: (856) 810-1515

Fax: (856) 810-1454

January 13, 2004

**TO: Examiner Harris (TC1600)**

**GROUP: 1642**

**FAX NUMBER: 703-872-9306**

**ATTORNEY DOCKET NO.: DEX-0142**

**SERIAL NO.: 09/802,674**

**FILED: March 9, 2001**

**NUMBER OF PAGES: 8**

**MESSAGE:** Attached please find Amendment Transmittal Letter, Reply under 37 C.F.R.  
1.111 mailed October 14, 2003, and Certificate of Transmission by Facsimile.

**Kathleen A. Tyrrell, Registration No. 38,350**

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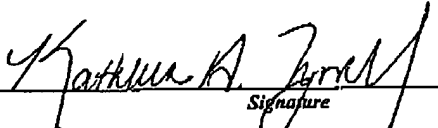
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>DEX-0142</b>	
Applicant(s): <b>Macina et al.</b>					
Serial No. <b>09/802,674</b>	Filing Date <b>March 9, 2001</b>	Examiner <b>Harris, Alana M.</b>		Group Art Unit <b>1642</b>	
Invention: <b>Method of Diagnosing, Monitoring, Staging, Imaging and Treating Gastrointestinal Cancer</b>					
<b>TO THE COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	1 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	5 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature <b>Kathleen A. Tyrrell, Registration NO. 38,350</b>			Dated: <b>January 13, 2004</b>		
<b>LICATA &amp; TYRRELL P.C.</b> 66 East Main Street Marlton, New Jersey 08053 Tel : 856-810-1515 Fax: 856-810-1454			<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Signature of Person Mailing Correspondence</div> <div style="border: 1px solid black; padding: 5px;">Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					